FORM D



UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

OMB	APPROVAL

OMB Number: 3235-0076

Expires: May 31, 2005 Estimated average burden hours per response.... 16.00

SEC USE ONLY					
Prefix	Serial				
DATE RECEIVED					

Name of Offering (check if this is an amendment and name has	chang	ed and i	ndicate	change)				
Name of Offering (check if this is an amendment and name has changed, and indicate change.) Partnership interests of TWJ Capital Opportunity Fund I, LP								
Filing Under (Check box(es) that apply): □Rule 504 □Rule 505 ☑Rule 506 □Section 4(6) □ULOE Type of Filing: ☑ New Filing □ Amendment A. BASIC IDENTIFICATION DATA								
A. BASI	C IDE	NTIFIC	ATION	DATA	(A)			
Enter the information requested about the issuer					2 2 2000			
Name of Issuer (check if this is an amendment and name has changed, and indicate change.) TWJ Capital Opportunity Fund I, LP								
Address of Executive Offices (Number and Street, City, State, Zip Code) 6 Landmark Square, Suite 404, Stamford, CT 06901-2792 Telephone Number (Including Orea Code) (203) 359-5610								
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)					Telephone Number (Including Area Code)			
Brief Description of Business: acquiring, directly or indirectly securities	, holdi	ng for in	vestme	nt, conv	erting or distributing or otherwise disposing of			
Type of Business Organization corporation business trust climited partnership already formed corporation business trust climited partnership, to be formed								
Actual or Estimated Date of Incorporation or Organization: Month Year					JUN 2 4 2005			
	0	4	0	5	THOMSON			
Jurisdiction of Incorporation or Organization: (Enter two-letter CN for Canada;								
GENERAL INSTRUCTIONS Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).								
When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.								
Commission (SEC) on the earlier of the date it is received by the SEC a	it the ad							
Commission (SEC) on the earlier of the date it is received by the SEC a	it the address.	dress give	n below	or, if rece				
Commission (SEC) on the earlier of the date it is received by the SEC adate it was mailed by United States registered or certified mail to that add	it the addiness.	dress give	en below	or, if recr C. 20549.	tived at that address after the date on which it is due, on the			
Commission (SEC) on the earlier of the date it is received by the SEC a date it was mailed by United States registered or certified mail to that add Where to File: U.S. Securities and Exchange Commission, 450 Fifth Streen Copies Required: Five (5) copies of this notice must be filed with the SE	t the address. et, N.W. C, one of	dress give , Washing of which n	en below gton, D.C nust be n need on	or, if reco	igned. Any copies not manually signed must be photocopies the name of the issuer and offering, any changes thereto, the			
Commission (SEC) on the earlier of the date it is received by the SEC a date it was mailed by United States registered or certified mail to that add Where to File: U.S. Securities and Exchange Commission, 450 Fifth Streen Copies Required: Five (5) copies of this notice must be filed with the SE of the manually signed copy or bear typed or printed signatures. Information Required: A new filing must contain all information reques information requested in Part C, and any material changes from the information Fee: There is no federal filing fee.	t the address. et, N.W. C, one of	dress give , Washing of which n	en below gton, D.C nust be n need on	or, if reco	igned. Any copies not manually signed must be photocopies the name of the issuer and offering, any changes thereto, the			
Commission (SEC) on the earlier of the date it is received by the SEC a date it was mailed by United States registered or certified mail to that add Where to File: U.S. Securities and Exchange Commission, 450 Fifth Streen Copies Required: Five (5) copies of this notice must be filed with the SE of the manually signed copy or bear typed or printed signatures. Information Required: A new filing must contain all information reques information requested in Part C, and any material changes from the information SEC.	t the address. et, N.W. C, one of ted. Ammation p fering Estice with exemptic	dress give Washing Washing f which n condiments previously kemption the Securin, a fee in	gton, D.C nust be n need on supplie (ULOE) rities Ad n the pro	or, if recording to the control of t	igned. Any copies not manually signed must be photocopies the name of the issuer and offering, any changes thereto, the A and B. Part E and the Appendix need not be filed with the of securities in those states that have adopted ULOE and that or in each state where sales are to be, or have been made. If a at shall accompany this form. This notice shall be filed in the			
Commission (SEC) on the earlier of the date it is received by the SEC a date it was mailed by United States registered or certified mail to that add Where to File: U.S. Securities and Exchange Commission, 450 Fifth Stree Copies Required: Five (5) copies of this notice must be filed with the SE of the manually signed copy or bear typed or printed signatures. Information Required: A new filing must contain all information reques information requested in Part C, and any material changes from the infor SEC. Filing Fee: There is no federal filing fee. State: This notice shall be used to indicate reliance on the Uniform Limited Of have adopted this form. Issuers relying on ULOE must file a separate no state requires the payment of a fee as a precondition to the claim for the content of the claim for the content of the cont	t the address. et, N.W. C, one of ted. Ammation processes with texemptic executions.	dress give Washing Washing f which n condiments previously kemption the Securin, a fee in	gton, D.C. must be m need on supplie (ULOE) rities Ad n the pro art of this	or, if recording to the control of t	igned. Any copies not manually signed must be photocopies the name of the issuer and offering, any changes thereto, the A and B. Part E and the Appendix need not be filed with the of securities in those states that have adopted ULOE and that or in each state where sales are to be, or have been made. If a at shall accompany this form. This notice shall be filed in the			

A. BASIC IDENTIFICATION DATA
2. Enter the information requested for the following:
Each promoter of the issuer, if the issuer has been organized within the past five years;
• Each beneficial owner having power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the
issuer;
• Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
• Each general and managing partner of partnership issuers.
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☑ General and/or Managing Partner
Full Name (Last name first, if individual) TWC Capital (GP) I, LLC
Business or Residence Address (Number and Street, City, State, Zip Code) 6 Landmark Square, Suite 404, Stamford, CT 06901-2792
Check Box(es) that Apply: \square Promoter \square Beneficial Owner \square Executive Officer \square Director \square General and/or Managing Partner
Full Name (Last name first, if individual) Citigroup, Inc.
Business or Residence Address (Number and Street, City, State, Zip Code) 399 Park Avenue, 2 nd Floor, New York, NY 10043, Attn: Michael Helfer
Check Box(es) that Apply: ☐ Promoter ☑ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Managing Partner
Full Name (Last name first, if individual) Thomas W. Jones
Business or Residence Address (Number and Street, City, State, Zip Code) 114 Adams Lane, New Canaan, CT 06840
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual)
Business or Residence Address (Number and Street, City, State, Zip Code)
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual)
Business or Residence Address (Number and Street, City, State, Zip Code)
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Managing Partner
Full Name (Last name first, if individual)
Business or Residence Address (Number and Street, City, State, Zip Code)
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Managing Partner
Full Name (Last name first, if individual)
Business or Residence Address (Number and Street, City, State, Zip Code)

2 of 9

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

	A. BASIC IDENTIFICATION DATA	
2.	Enter the information requested for the following:	
	Each promoter of the issuer, if the issuer has been organized within the past five years;	
•	Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of,	10% or more of a class of equity securities of the
	issuer,	
•	Each executive officer and director of corporate issuers and of corporate general and managing	partners of partnership issuers; and
•	Each general and managing partner of partnership issuers.	
Ch	heck Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director	General and/or Managing Partner
Fu	ull Name (Last name first, if individual)	
Bu	usiness or Residence Address (Number and Street, City, State, Zip Code)	
Ch	heck Box(es) that Apply: \Box Promoter \Box Beneficial Owner \Box Executive Officer \Box Director \Box	General and/or Managing Partner
Ful	uli Name (Last name first, if individual)	
Bu	susiness or Residence Address (Number and Street, City, State, Zip Code)	

					B. INF	DRMATI	ON ABO	UT OFFE	RING	*. *			
<u>kan katan dan dan katan dan menungkan dan menungkan dan dan dan dan dan dan dan dan dan d</u>									Yes	No			
!. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?										전			
2. What is the minimum investment that will be accepted from any individual?									N/A	No			
3. Does the offering permit joint ownership of a single unit?													
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only. Not applicable.													
Full Name	(Last nam	e first, if	individual)									
Business or	r Residen	æ Address	(Number	and Stree	t, City, St	ate, Zip C	ode)		.				
Name of A													
States in W													
(Check "Al									1		f TTO		All States
[AL] [IL]	[AK] [IN]	[AZ] [IA]	[AR] [KS]	[CA] [KY]	[CO] [LA]	[CT] [ME]	[DE] [MD]	[DC] [MA]	[FL] [MI]	[GA] [MN]	[HI] [MS]	[ID] [MO]	
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]	
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	įvrj	[VA]	[WA]	[WV]	[wi]	[WY]	[PR]	
Full Name	(Last nam	e first, if i	individual)					···············	·····			
Business or	r Residenc	æ Address	Number	and Stree	t. City. St	te Zin C	nde)					······································	
					,,	,,	,		٠.				
Name of A	ssociated	Broker or	Dealer										
1 table of 70	3300/101001	DIORCI GI	Dana										
States in W	hich Pers	on Listed	Has Solici	ited or Inte	ends to So	icit Purch	ocers			***************************************			
													All States
[AL]	[AK]	[AZ]	[AR]	[CÁ]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]	
[IL]	[IN]	[AI]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]	
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]	
[RI]	[SC]	[SD]	[IN]	[XX]	[עד]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]	
Full Name	Full Name (Last name first, if individual)												
Business or Residence Address (Number and Street, City, State, Zip Code)													
Name of Associated Broker or Dealer													
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)								,	All States				
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]	
	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]	
[MT] [RI]	[NE] [SC]	[NV] [SD]	[NH] [NT]	[KI] [XI]	[NM] [UT]	[YY] [YT]	[NC] [VA]	[ND] [WA]	[WV]	[OK] [WI]	[OR] [WY]	[PA] [PR]	
£ J	[]	[1	F 1	* 7	F ~ ~ 1	(, -1	F		F 2	r	F w.)	F}	

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

. 1.	sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged		
	, m , en , :	Aggregate	Amount
	Type of Security	Offering Price	Already Sold
	Debt	-0-	-0-
	Equity	-0-	-0-
	Common Preferred (convertible)	•	•
	Convertible Securities (including warrants).	-0-	-0-
	Partnership Interests.	\$60,010,000	\$60,010,000
	Other (Specify membership interests in LLC)	-0-	-0-
	Total	\$60,010,000	\$60,010,000
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	3	\$60,010,000
	Non-accredited Investors.	-0-	-0-
	Total (for filings under Rule 504 only)		
	Answer also in Appendix, Column 4, if filing under ULOE		
, 3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question I.	Type of Security	Dollar Amount Sold
	Type of offering		
	Rule 505		
	Regulation A		
	Rule 504.		
	Total		
in ma	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities this offering. Exclude amounts relating solely to organization expenses of the issuer. The information ay be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an timate and check the box to the left of the estimate.		
	Transfer Agent's Fees.		-0-
	Printing and Engraving Costs		-0-
	Legal Fees	Ø	\$350,000*
	Accounting Fees	2	-0-
	Engineering Fees	۵	-0-
	Sales Commissions (specify finders' fees separately)	0	-0-
	Other Expenses (identify):		-0-
	Total	Ø	\$350,000

This amount includes legal fees, accounting fees and all other transaction-related expenses.

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AN	ND USE	OF PR	OCEEDS	
b. Enter the difference between the aggregate offering price given in response to Part C - Quest total expenses furnished in response to Part C - Question 4.a. This difference is the "adjusted gr proceeds to the issuer."	ross			\$59,660,000
, ,)		••••		\$39,000,000
5. Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be of the purposes shown. If the amount for any purpose is not known, furnish an estimate and chee the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to forth in response to Part C - Question 4.b above.	ck the bo	x to		
			Payments to Officers, Directors & Affiliates	Payments To Others
Salaries and fees				
Purchase of real estate	******			
Purchase, rental or leasing and installation of machinery and equipment		ο.		
Construction or leasing of plant buildings and facilities	···· 			0
Acquisition of other businesses (including the value of securities involved in this offering	•		\$59,660,000	\$59,660,000
may be used in exchange for the assets or securities of another Issuer pursuant to a mer	ger)	Ø		
Repayment of indebtedness (contingent on sufficient funds being raised in offering)	,			
Working capital				
Other (specify):	i			
Column Totals	1	Ø	\$59,660,000	\$59,660,000
Total Payments Listed (column totals added)		-	\$ 59	,660,000
D. FEDERAL SIGNATURE			***************************************	
The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of accredited investor pursuant to paragraph (b)(2) of Rule 502.				
Issuer (Print or Type): TWJ Capital Opportunity Fund I, LP	J	May C	2005	
Name of Signer (Print or Type): Thomas W. Jones Title of Signer (Print or Type): Managing Member of General Partn	er, TWJ	Capi	tal (GP) I, LLC	
ATTENTION				····
*ntentional misstatements or omissions of fact constitute federal criminal violati	ions. (S	ee 18	U.S.C. 1001.)	